

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10652927

FILING DATE 9-2-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2	/					
3	2					
4	2					
5	2					
6	2					
7	/					
8	0					
9	0					
10	0					
11	0					
12	/					
13	/					
14	2					
15	2					
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50						
TOTAL IND.	10					
TOTAL DEP.	16					
TOTAL CLAIMS	26					

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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TOTAL CLAIMS						